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Borough of Royal Leamington Spa.

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**Report of  
School Medical Officer  
for 1929.**

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LEAMINGTON SPA:  
CHRONICLE PRESS, CHAPEL STREET.



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# Borough of Royal Leamington Spa.

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## EDUCATION COMMITTEE.

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(Chairman).

Mr. Councillor J. GAMESON (Vice-Chairman).

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Together with Mrs. BURY, Miss BRIGHT, The Rev. Canon F. B. FEIST, The Rev. G. H. BAMFORD, The Rev. E. STANLEY EDWARDS, Mr. H. R. HEATLEY, M.A., and Capt. H. PERCY SMITH.

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## MEDICAL INSPECTION STAFF.

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### SCHOOL NURSES:

Miss MORRIS.

Miss MASKELL (Part Time). Resigned 31st May, 1929.

Miss NORMINGTON (Part Time). Appointed 14th Aug., 1929.

### CLERK:

Miss WEBB.

### DENTAL SURGEON:

(Part Time).

LESLIE E. HANSON, L.D.S.

### SCHOOL MEDICAL OFFICER:

W. L. GOLDIE, F.R.C.S., D.P.H.

## To the Chairman and Members of the Leamington Spa Education Committee.

Mr. Chairman, Ladies and Gentlemen,

I beg to report as follows with reference to the School Medical Department for the year 1929.

The number of children examined in the three "Code" Groups was 1,090. Of these the percentage found to require treatment was 13·8.

The number examined was 22 less than in 1928. Since 1926 there has been a small decrease each year, and in view of the falling Birth Rate this is likely to continue.

The number of children treated at the Warneford Hospital for Defective Vision, Enlarged Tonsils and Adenoids, and Ring-worm was 105.

In the "Code" Groups only 33% of the children were vaccinated. Among Entrants, however, 40% had been immunised against Smallpox, an increase of 10% over last year.

An Ultra-Violet Light apparatus was installed at the Clinic at the beginning of the year. Unfortunately, owing to illness among the Staff and the fact that there was only one School Nurse from June 1st to August 14th, the work was distinctly hampered and fewer cases treated than had been anticipated.

In all, 39 children of all ages received treatment. The number, however, is so small that it is impossible to draw conclusions of any value. My own personal feeling is that in certain cases it appeared to do good, and in several instances the mothers of the children under treatment seemed definitely to consider that benefit had been derived.

Full advantage is taken of the Dental Clinic, the work of which, to my mind, is of the utmost importance.

I trust that in the near future the number of sessions may be increased, as there is no doubt of the value and necessity of this form of treatment.

As in previous years, the Staff of the Warneford Hospital and Dr. Cyriax, the Tuberculosis Officer, have rendered much valuable aid, and my best thanks are due to them and to all those associated with Education in the Borough for their unfailing courtesy and hearty co-operation.

I am,

Your obedient Servant,

*March 18th, 1930.*

W. L. GOLDIE.



## Report of School Medical Officer for 1929.

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The total area of the Borough of Royal Leamington Spa is 2,816 acres, divided up as follows:—

Leamington Priors	...	1,594 acres.
New Milverton	... ..	691 ,,
Lillington	... ..	531 ,,

There are nine Public Elementary Schools, of which four schools with nine departments are non-provided. Of the provided schools, the Central is for children from 11 to 15 years of age and upwards. The instruction here is more practical and advanced. The number of children on the register on Dec. 24th, 1929, was 3,392, an increase of 7 as compared with 1928.

## ATTENDANCES FOR YEAR, 1ST JANUARY—31ST DECEMBER, 1929.

## NON-PROVIDED SCHOOLS.

No.	Name of School.	Average on Reg- isters.	Average Attend- ance.	Per- centage
1	Bath Place (C. of E.) Mixed ...	343	294	86
2	Lillington (C. of E.) Mixed ...	107	94	88
3	St. Paul's (C. of E.) Mixed ...	366	325	89
4	St. Peter's (R.C.) Boys ...	111	98	88
	„ Girls ...	126	107	85
	„ Infants ...	79	65	82
		1132	983	87

## PROVIDED SCHOOLS.

5	Clapham Terrace, Senior, Mixed...	206	178	86
	„ Junior, Mixed...	372	328	88
6	Campion Central, Boys ...	217	199	92
	„ „ Girls ...	207	184	89
	Leicester Street, Infants ...	131	111	85
7	Milverton, Mixed ...	283	252	89
	„ Infants ...	153	131	86
8	Shrubland St. Junr., Mixed "A" ...	346	313	90
	„ „ „ „ "J" ...	325	292	90
		2240	1988	89
		3372	2971	88



## STAFF.

1. The School Medical Staff consists of an S.M.O. (also M.O.H.), one whole-time and one half-time School Nurse, and one part-time Dental Surgeon, Mr. Leslie E. Hanson, L.D.S., who holds 4 sessions per week. Under an agreement between the Borough Council and the Warneford Hospital, certain cases are, on the recommendation of the S.M.O., treated by Specialists attached to the Hospital Staff as follows:

For Tonsils and Adenoids: F. W. Sydenham, M.D., F.R.C.S.

For Defective Vision: T. Harrison Butler, M.A., M.D.

For Ringworm: W. Edmund Jones, M.R.C.S., L.R.C.P.

## CO-ORDINATION.

### (i) **Infant and Child Welfare.**

An Infant and Child Welfare Clinic is held once a week, and children are seen here up to two years of age, and in some cases considerably later.

The children who attend the Clinic (and all others as far as possible) are regularly visited up to the time of School age, at least once a quarter during the third year, and at least twice a year during the 4th and 5th years.

Delicate children and those undergoing any special form of treatment are kept under close supervision, and any suspected cases of Tuberculosis are referred to Dr. Cyriax, the Assistant County Tuberculosis Officer, to whose help I am greatly indebted

Needy cases are provided with Out and In-Patient letters to the Warneford Hospital.

### (ii) **Nursery Schools.** There are none in the Borough.

## SCHOOL MEDICAL SERVICE IN RELATION TO ELEMENTARY SCHOOLS.

3. There are nine Elementary Schools in the Borough, of which five are Provided and four Non-Provided Schools. The main features of these were set out in the table appended at the end of the report for 1925.

4. **Medical Inspection.**—The age groups inspected have been those laid down by the Board of Education. A few children may have escaped routine inspection owing to illness

or absence from school, but as far as possible these were collected and examined before the end of the year. At no school is there a room specially set apart for medical inspection. This takes place either in the head teacher's room or in one of the smaller class-rooms.

**5. Findings of Medical Inspection.**—(a) Uncleanliness.—On the whole the standard of cleanliness is very fair.

There was a marked reduction in the number of cases of contagious Impetigo recorded—the number being nearly 100 less than last year. The total number of examinations made by the School Nurses was 9,224, and the average number of visits paid to the Schools was 118. Both these figures are less than in 1928, but this was accounted for by the fact that from May 31st until August 14th it was impossible to obtain a suitable School Nurse to take the place of Miss Maskell, who resigned owing to obtaining another appointment.

(b) Minor Ailments.—These consisted mainly of cuts, bruises, small abscesses, and various skin diseases. As far as is known there are only 7 cases of Goitre among children of School age. The number of children with Thyroid enlargement seems for some reason or another to have decreased during the last few years.

(c) Tonsils and Adenoids.—Under an Agreement made in 1921, cases of enlarged and unhealthy Tonsils and Adenoids are treated at the Warneford Hospital. The number operated on in 1929 was 58, as compared with 62 in 1928. During the last few years the number of cases submitted to operation from Entrants has decidedly increased. I feel sure that this has proved most beneficial to the children concerned.

The freeing of the Nose and Throat from unhealthy conditions is bound to be a factor of importance in reducing the number and severity of common colds, and also to the spread of infection to the middle Ear by way of the Eustachian Tubes. Care is taken to rid children of carious Teeth and attend to the general toilet of the mouth before operation.

Evidence in support of the improvement in the children's general condition is often gratuitously proffered by the parents when they are examined.



(d) Tuberculosis.—One case of Miliary Tuberculosis was notified in a boy of 9 years of age who died in Warwick Infirmary. Two cases of Glands in the Neck were notified locally and one was transferred from Barnados Homes.

There was also one case of Tuberculosis of the Hip reported, but there seems some doubt about the diagnosis in this case.

(e) Skin Diseases.—The bulk of these were cases of contagious Impetigo. Scabies, as has been noted for some years, is very rare.

(f) External Eye Diseases.—No large number of these were seen. The few cases of blepharitis and conjunctivitis yielded fairly readily to treatment. In the month of November a visit was paid to all schools within the course of a few days, and children noted with any form of squint. Fifty-two cases were found, eighteen of whom wore glasses. The form of squint was as follows:—Lt. Int. Strabismus, 32; Rt. Int. Strabismus, 18; Double Convergent Strabismus, 2. Nebulae of the Corneal were noticed in a few cases, in 5 of which vision was markedly interfered with.

(g) Vision.—During the visit alluded to above in November, the number of children wearing glasses was found to be 119, a percentage of 3 of those on the school register. Excluding infants, 717 children were examined in the schools. Of these, good vision—that is to say, not less than 6/9 in both eyes—was found in 633 cases, or 88 per cent., and in 17, or a further 2.3 per cent., there was fair vision, i.e., not less than 6/12 in both eyes. Under the scheme of treatment with the Warneford Hospital, 40 children received treatment. Eight of these were provided with spectacles free of cost.

(h) Ear Disease and Hearing.—The number of deaf and dumb children of school age is four, viz., three boys and one girl. They are all in an institution at Edgbaston. All these children are quite up to the average of intelligence. A few cases of partial deafness due to Chronic Otitis Media were noted, but in one only was hearing markedly affected.

(i) Dental Defects.—The work at the Dental Clinic continues to progress satisfactorily, and, as the Dental Surgeon points out in his report, there is again an increase in the number of cases treated as a result of periodical examination,



which seems to show that the children are themselves anxious to take advantage of the facilities provided and realise the importance of the care of their teeth.

(j) Crippling Defects.—As has been reported in previous years, cases of Rickets in which much crippling has resulted are rarely seen. A search through the medical cards of the children on the school register revealed 61 cases. In the majority of these, little beyond beading of the ribs and slight enlargement of the ends of Radius and Ulna was found, and nine cases only showed any marked degree of severity.

Cases of Infantile Paralysis numbered nine, in seven boys and two girls. All these cases had received treatment, and in three cases surgical boots were worn.

The following cases of developmental defects were noted and kept under observation, viz.:

Spina bifida .....	1
Congenital dislocation of hip .....	1
Hare lip .....	1
Hare lip and cleft palate .....	4
Coloboma of Iris and Chovoid .....	1
Buphthalmos .....	1
Extensive bone deficiencies .....	1

The number of children known to be suffering from some form of Heart disease was 28. Of these four were treated during the year as in-patients at the Warneford Hospital. All the children have been kept under close observation during the year.

**6. Infectious Diseases.**—Nineteen cases of scarlet fever were notified, compared with 4 in 1928. The type of disease continues to be very mild.

Diphtheria cases numbered one only, as against 7 last year.

Only 3 cases of mumps were reported, as against 5 in the previous twelve months.

46 cases of measles and 47 of whooping cough were reported as against 273 and 55 in 1928.

Chicken pox cases numbered 50, a decrease of 31 on the previous year.

To none of the schools have any special certificates of closure been given owing to an attendance of under 60%.

The table below shows the condition of children as regards vaccination.

#### VACCINATION.

	Total Examined.	Not Vaccinated.	Vaccination Marks.				Total.	Percentage
			1	2	3	4		
GIRLS	563	371	13	27	26	123	189	33·5
Boys	527	354	7	31	27	108	173	32·8

Of those vaccinated, the figures are:—

	Total.	Vaccinated.	Percentage.
Girls—Entrants up to 6 years	195	78	40
From 6 ,, 12 years	202	56	27
,, 12 ,, 14 years	166	55	33
Boys—Entrants up to 6 years	176	77	43
From 6 ,, 12 years	193	51	26
,, 12 ,, 14 years	158	45	28

#### PREVIOUS INFECTIOUS DISEASES.

An enquiry into the number of children who had at one time or another suffered from an attack of one of the commoner infectious diseases gave the following figures for those examined in the three age periods this year:—

Measles	...	...	...	...	580
Whooping Cough	...	...	...	...	418
Chicken Pox	...	...	...	...	255
Scarlet Fever	...	...	...	...	21
Mumps	...	...	...	...	32
Diphtheria	...	...	...	...	13
Pneumonia	...	...	...	...	26

#### Ultra Violet Light Treatment.

At the beginning of the year an Ultra-Violet Light apparatus was installed at the Clinic.

The type of Lamp used is a K.B.B. Heliorite Stand Lamp with atmospheric Q.M.V. burner, 230 volts direct current.

Except for special local conditions there was exposure of the whole body, back and front, at a distance of 3 feet, twice a week.

The initial exposure varied from 1 to 3 minutes, which was increased in certain cases to a maximum of 15 minutes.

39 children were treated, of whom 13 were of School age. The numbers are of course too small to draw conclusions of any value, especially as to the value of Ultra-Violet Light alone, as in all cases any defect found—such as enlarged Tonsils and Adenoids, carious Teeth, chronic Constipation, etc.—were treated at the same time.

However, on the whole, one gained the impression which was supported by the evidence, voluntarily given, by some of the mothers and teachers as to improvement in appetite, less disturbed sleep, and greater animation, that in certain cases definite benefit was derived.

The results in the 13 children of School age are briefly summarised as follows:—

- (1) H. Z. Male, 8 years.—Anaemic, poor appetite, listless. Gland removed in London from Right side of neck. Seen by Tuberculosis Officer who recommended Ultra-Violet light. Number of exposures, 18. Mother is pleased, says appetite has greatly improved. Now sleeps well and is much brighter. (Still under treatment).
- (2) P. C. Male, 6 years.—Anaemic. Suffers from severe colds and Bronchitis. Number of exposures, 17. Gained  $1\frac{1}{2}$  lbs. in two months. Mother says much better and colds less severe. (Still under treatment).
- (3) B. V. Female, 6 years.—Extensive warts all over fingers and backs of hands. Very little improvement with Acetic Acid. Number of exposures, 17. Great improvement. (Still under treatment). At the time of writing this report there is practically no trace of any warts and the skin is soft and supple.
- (4) W. W. Male, 5 years.—Anaemic, flabby. Said to have had Glycosuria as a baby. No trace of sugar or albumen found in Urine. Number of exposures, 5. After 5th treatment very sick. Perspiration at nights profuse. Mother said he appeared worse after treatment. (Treatment stopped).



- (5) J. B. Male, 5 years.—Anaemic, poor appetite, very apathetic. Number of treatments, 11. Weight gained, 1 lb. in 2 months. Mother thought no improvement and ceased to bring to Clinic.
- (6) E. S. Female, 9 years.—Thin, Anaemic, Glands in Neck. Tonsils removed in June, 1927, but no improvement in glandular enlargement. Number of treatments, 13. No improvement. A few weeks after cessation of treatment child was notified as suffering from T.B. Adenitis. Glands subsequently broke down, after which she seemed to get better.
- (7) H. N. Female, 10 years.—Anaemic, listless, poor feeder. Number of treatments, 15. Gained in weight  $2\frac{1}{2}$  lbs. in 2 months, after which child ceased to attend.
- (8) R. H. Female, 6 years.—For two months after child had nail removed from septic finger, wound still refused to heal. Number of treatments, 9. Wound soundly healed.
- (9) A. B. Male, 8 years.—In February chilblains on all toes, Right Foot, discharging sore on little toe. Number of treatments, 5. Cured. In November again appeared with chilblains on same foot. Had 4 treatments and there was some improvement, but then ceased to attend.
- (10) W. J. Male, 7 years.—Asthma and Bronchitis. Had three severe attacks between Xmas, 1928, and February, 1929. Number of treatments, 26. Mother says the attacks of Asthma are much less severe and Bronchitis has cleared up. Appetite generally improved. Increase of weight in 3 months, 2 lbs.
- (11) G. G. Female, 5 years.—Lambliasis. Very thin, tired and anaemic. Number of treatments, 27. No improvement.
- (12) M. J. Female, 12 years.—Chilblains all toes, Left Foot. Indolent ulcer, 4th toe. Has similar condition every year. Number of treatments, 24. After 3rd treatment pain much less, and improvement noted after 8th exposure. Cured and Ulcer healed.

- (13) C. A. Female.—Thin anaemic child, very poor appetite. Rickets chest. When visiting the Roman Catholic School she attends, the Nun in charge drew my attention to the child and remarked on her great physical and mental improvement.

7. **Following Up.**—In all cases where a treatment order to the Warneford Hospital has been given, the child is visited on the day following its attendance at the Hospital by the School Nurse, and as soon as possible he or she is brought to the School Clinic for examination by the S.M.O. Practically all cases of scarlet fever, diphtheria and typhoid are removed to Heathcote Hospital and a report on the home conditions set out by a Sanitary Inspector. In the case of non-notifiable diseases, such as chicken-pox, measles, whooping cough, etc., a visit is paid by the School Nurse, who, if no doctor had been called in, gives instructions as to general nursing, the necessity for calling in medical aid should complications arise, the probable date on which return to school may be permitted, and the need or otherwise of keeping contacts away from school for a period. Swabs for bacteriological examination are taken if considered advisable.

In the case of tuberculous children, the task of supervision is in the main handed on to the Health Visitor, who enquires into family conditions and reports on the form of treatment outlined and the general progress of the patient. Cases failing to attend the School Clinic when requested to do so are visited and also referred to the School Attendance Officer for a report.

8. **Medical Treatment.**—(a) Minor Ailments: These are treated at the School Clinic which is open daily at 9 a.m. by the School Nurse. On Tuesday and Saturday mornings the School Medical Officer attends at 10 a.m. The total number of attendances during the year was 7,150, giving a daily average of 23 cases.

(b) Tonsils and Adenoids. — Operations for enlarged Tonsils and Adenoids are performed at the Warneford Hospital by Mr. Sydenham, the Surgeon to the Nose and Throat Department. During the year 58 cases were treated, with most satisfactory results.

(c) External Eye Diseases.—Minor cases were treated at the School Clinic; more serious ones were sent to the Warneford Hospital.

(d) Vision.—40 cases were sent to Mr. Harrison Butler at the Warneford Hospital, for all of whom glasses were prescribed and obtained. In eight cases the cost of spectacles was borne by the Education Authority.

(e) Ear Disease and Hearing.—Comparatively few cases of Ear Disease were seen. A fair number of children with wax in the ears came to the Clinic. A few cases of chronic Otorrhoea were sent to the Warneford Hospital, where they received treatment.

(f) Crippling Defects and Orthopædics.—Up to the present no special provision has been made by the Local Authority for the treatment of Crippling Defects, but working in conjunction with the Warneford Hospital, where there is a well equipped and up-to-date Electrical and Massage Department, adequate provision has been made for treatment.

Three children suffering from Infantile Paralysis have been supplied with the necessary surgical boots.

Four cases of Heart Disease have been admitted as in-patients to the Hospital during the year.

(g) **Tuberculosis.**—Of the 15 cases of tuberculosis in children of school age, the site of the disease was as follows:—

Chest: 5, all boys. Two were admitted to Warwick Infirmary and one died there. The other three have attended school regularly.

Bones and Joints: 4. One of these was discharged from Heatherwood, where he had been for some time early in the year. The remainder have attended school with a very fair degree of regularity.

Abdomen: 1. In this case the disease is apparently quiescent.

Glands: 5. One of these has attended Hertford Hill for treatment, and one had an abscess opened at the Warneford Hospital.

All these cases have been regularly visited and reported on by the Health Visitor, as well as the School Nurse.



In addition, 18 children, in whom debility, indefinite pulmonary or abdominal conditions, or bad family history have been noted, have been referred to Dr. Cyriax, the Tuberculosis Officer, to whose ready assistance I am greatly indebted.

(h) **Skin Diseases.**—With the exception of ringworm of the scalp, for which X-ray treatment is provided at the Warneford Hospital, where 8 cases were treated this year, nearly all cases of skin diseases are treated at the **School Clinic**.

As in previous years, the bulk of the cases were of contagious impetigo, of which there were 189.

The diminution in the number of cases of scabies seen nowadays is most striking.

The only four cases seen during the year were treated by the so-called Danish method, with most excellent results.

(i) **Dental Defects.**—The Dental Surgeon attends the School Clinic on Monday and Thursday mornings and afternoons, and in all held 147 sessions, of which eight were devoted to inspection and the remainder to treatment. Of the work at the Dental Clinic, Mr. Hanson reports as follows:—

“ The dental treatment of school children in Leamington Spa continues to be in a very satisfactory state.

“ Despite a decline in the number of children actually treated in comparison with 1928, the number of cases treated as a result of periodical inspection again shows an increase.

“ Many of the children treated at the Avenue Road clinic appear to take an intelligent interest in questions relating to oral hygiene, and generally carry out any prescribed treatment conscientiously.

“ The question of the regulation of misplaced teeth and abnormal jaws, a special treatment not provided for elementary school children under existing schemes, is constantly being raised by parents, and it must be admitted a general and satisfactory solution to the problem has yet to be found. A large number of such cases can be remedied to some extent by judicious extraction and the increase in the number of permanent teeth extracted may be partly traced to an endeavour to reduce dental abnormalities by surgical methods.

“ The slightly smaller attendances have allowed a little more time for conservancy work, with the result that the number of fillings has increased in comparison with last year, and the number per head has risen from 1.14 to 1.2.

“ In spite of this increase it has only been possible to fill a proportion of the teeth which strictly require this treatment.

“ The subjects of diet and oral hygiene have been discussed at almost every session, stress being laid upon the necessity of promoting proper exercise of the teeth and jaws by the consumption of raw green vegetables, fruits, etc., instead of the tooth destroying carbohydrates, sweets, and highly refined flour products.

“ In order to encourage the habit of dental cleanliness a supply of cheap but efficient tooth-brushes has been procured and sold to the children at cost price.”

9. **Open Air Education.**—There are no open air Schools residential or otherwise in the Borough, but classes are sometimes conducted in the playgrounds during the summer months, more especially in the Infant Schools.

10. **Physical Training.**—Physical training is undertaken by the School teachers in all the Schools, adapted to the age and sex of the children, and in accordance with the Board's Syllabus. The usual method is for each class to spend 12 to 15 minutes on physical exercises daily. There is no area Supervisor.

11. **Provision of Meals.**—No arrangements are in force for the provision of meals for school children.

12. **School Baths.**—There are no school baths, but full advantage is taken of the Corporation Swimming Baths. Tickets for these are purchased at threepence each by the Education Committee and re-sold to the scholars at 1½d. each. In 1929 children from the various Schools purchased 8,400 tickets.

13. **Co-operation of Parents.**—Parents are notified beforehand of the date on which their children are to attend for routine examination, and are requested to be present.

For 1929 the percentage of parents attending for all age groups was 52. For Infants alone it was 75 per cent., but for Leavers it dropped to the low figure of 18 per cent.

Although inspection is rendered slower if parents are present, this is undoubtedly counterbalanced by the fact that any defects found can be pointed out without delay and the proper form of treatment indicated.



14. **Co-operation of Teachers.**—In spite of the inconvenience entailed by having to give up either the Head Teacher's Room or a Class Room for routine inspection, the teachers have invariably given every assistance in their power.

In notifying cases of non-notifiable infectious diseases, in sending cases of skin diseases to the Clinic for treatment, and in periodically sending children for dental re-inspection, they have rendered most useful service.

15. **Co-operation of School Attendance Officer.** — The School Attendance Officer's chief work is, as far as the School Medical Service is concerned, in notifying the names of all entrants and leavers at the schools, in tracing children whose attendance at school or at the Clinic is unsatisfactory, and in seeing that children who are under private practitioners are supplied with an adequate certificate for absence. As a general rule, poor attendance at school falls into one of two classes, (a) the child, frequently an only child, who, in the opinion of the mother, "suffers from nerves," (b) the eldest daughter nearing the end of a school career, especially if one of a large family and more especially if a new arrival in the family is expected.

16. **Co-operation of Voluntary Bodies.**—The National Society for Prevention of Cruelty to Children maintains an inspector in the town, and his aid has been called upon on a few occasions. Boy Scout and Girl Guide organizations are fairly well supported, and a certain number of children obtain a camp holiday.

17. **Blind, Deaf, Defective, and Epileptic Children.**—

(a) The register for these children has been kept up to date during the year, and they have all been seen at least twice during 1929.

Of five Epileptics, in only one is the disease at all severe, and of these one has had no attacks during the year.

Four deaf and dumb children are in an Institution at Edgbaston, and their reports have been uniformly satisfactory.

During this year no children were notified to the Local Authority, under the Mental Deficiency Act 1915.

The principal sources of information as to defective children are: (a) Through the Infant Welfare Clinic; (b) visits to homes by Health Visitor; (c) notifications by medical practitioners to the M.O.H.; (d) visits of inspection by the School



Attendance Officer : but in many cases the defect is not reported until the child is seen on its entrance to School life.

(b) There is no special class for mentally defective and backward children. The majority attend the Public Elementary Schools.

I think it may be said that the only really beneficial treatment for the mentally defective child is in an Institution. Hard as the separation may be on the parents, I feel sure it is more than counterbalanced by the advantages to the child.

Unfortunately vacancies in Institutions are few and far between, and the present day cost is prohibitive.

Dull and backward children come in another category. In many cases the condition results from ill health, some physical defect, or irregular attendance at School, and in all probability Special Classes, especially if the number of children is restricted so that more individual attention could be given to each child, would prove advantageous.

**18. Nursery Schools.**—There are no nursery schools in the Borough, but the National Institute for the Blind, during 1924, have opened a "Sunshine Home" for Blind Children in the Town, with accommodation for 30 babies. Children are taken in up to 5 years of age. There is a Certificated Teacher, and the Home receives a grant from the Board of Education.

**19. Secondary Schools.**—The Secondary Schools are in connection with the Warwickshire County Council, and medically examined by the County School Staff.

**20. Continuation Schools.**—Evening classes are run in conjunction with the Warwickshire County Council.

**21. Employment of Children and Young Persons.**—Under the Employment of Children Act, 1903, and Education Act, 1918, and Bye-laws made thereunder, 72 certificates of fitness have been given, 71 to boys, and 1 to a girl, who was employed as a house girl.

In 30 instances the work required by these boys was the delivery of newspapers, 34 are employed as errand boys, and 7 as house boys.

There is a Juvenile Employment Committee in connection with the County, and as far as possible employment is found for those leaving school,

TABLE I.  
BOARD OF EDUCATION.  
RETURN OF MEDICAL INSPECTIONS.

A. Routine Medical Inspections.				
Number of Code Group Inspections :				
Entrants	...	...	...	371
Intermediates...	...	...	...	395
Leavers	...	...	...	324
Total				1090
Number of other Routine Inspections				
	...	...	...	Nil.
B. OTHER INSPECTIONS.				
Number of Special Inspections	...			1034
Number of Re-Inspections...	...			982
Total				2016

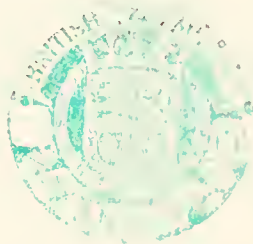


TABLE II.

## BOARD OF EDUCATION

Return of Defects found in the course of Medical Inspection 1929.

Defect or Disease.				Routine Inspections.		Special Inspections.	
				Number of Defects.		Number of Defects.	
				Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.
1				2	3	4	5
Skin.	Malnutrition ...	...	...	—	8	—	3
	Uncleanliness ...	...	...	35	77	27	16
	Ringworm—						
	Head ...	...	...	—	—	11	—
	Body ...	...	...	—	—	6	—
	Scabies ...	...	...	—	—	4	—
	Impetigo ...	...	...	10	—	179	—
Eye.	Other Diseases(non-Tubercular)			7	—	14	—
	Blepharitis ...	...	...	6	—	7	—
	Conjunctivitis ...	...	...	1	—	4	—
	Keratitis ...	...	...	—	—	—	—
	Corneal Opacities ...	...	...	—	—	—	7
	Defective vision						
	(excluding squint)			20	32	34	119
Ear.	Squint ...	...	...	7	15	4	26
	Other conditions ...	...	...	—	2	14	7
	Defective Hearing ...	...	...	—	—	2	2
	Otitis Media ...	...	...	—	—	8	—
Nose and Throat.	Other Ear Diseases ...	...	...	2	—	32	—
	Enlarged Tonsils only ...	...	...	14	177	—	—
	Adenoids only ...	...	...	2	12	4	—
	Enlarged Tonsils & Adenoids			86	47	38	62
	Enlarged Cervical Glands						
	(non-Tubercular)			8	313	4	53
	Other conditions ...	...	...	—	3	8	—
	Defective Speech ...	...	...	—	8	1	7
	Teeth—Dental Diseases ...			492	132	704	—

TABLE II., BOARD OF EDUCATION (continued).

Return of Defects found in the course of Medical Inspection, 1929.

Defect or Disease.					Routine Inspections.		Special Inspections.	
					Number of Defects.		Number of Defects.	
					Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.
1					2	3	4	5
Heart and Circulation.	Heart Disease—							
	Organic ... ..				3	4	8	16
	Functional ... ..				6	3	1	3
	Anæmia ... ..				6	83	4	73
Lungs.	Bronchitis ... ..				—	15	3	12
	Other Non-Tubercular Diseases				—	1	2	3
	Pulmonary—							
	Definite ... ..				—	—	6	—
Tuber- culosis.	Suspected ... ..				—	—	—	6
	Non-Pulmonary—							
	Glands ... ..				—	—	2	3
	Spine ... ..				—	—	—	—
	Hip ... ..				—	—	2	2
	Other Bones and Joints ...				—	—	—	—
	Skin... ..				—	—	—	—
	Other Forms ... ..				—	—	—	—
Nervous	Epilepsy ... ..				—	2	—	1
	Chorea ... ..				1	—	1	1
	Other Conditions ... ..				—	—	—	4
Deform- ities.	Rickets ... ..				—	33	—	28
	Spinal Curvature ... ..				—	—	—	—
	Other Forms ... ..				4	4	—	7
	Other Defects and Diseases ...				4	12	503	73
					714	983	1637	534



TABLE II., BOARD OF EDUCATION (continued).

B. Number of individual children found on Routine Medical Inspection to require treatment (excluding Uncleanliness and Dental Diseases).

GROUP.	Number of Children.		Percentage of Children found to require treatment.
	Inspected.	Found to require treatment.	
1	2	3	4
Code Groups—			
Entrants ... ..	371	65	17·5
Intermediates ... ..	394	50	12·6
Leavers ... ..	324	36	11·1
Total (code groups)...	1090	151	13·8
Other Routine Inspections ...	—	—	—

TABLE III.  
BOARD OF EDUCATION.  
Return of all Exceptional Children in the Area.

			BOYS.	GIRLS.	TOTAL
BLIND. (Including partially blind).	(1) Suitable for training in a School or Class for the totally Blind.	Attending Certified Schools or Classes for the Blind ...	—	—	—
		Attending Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	1	—	1
	(2) Suitable for training in a School or Class for the partially Blind.	Attending Certified Schools or Classes for the Blind ...	—	—	—
		Attending Public Elementary Schools ...	5	1	6
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
DEAF. (Including deaf and dumb and partially deaf).	(1) Suitable for training in a School or Class for the deaf or deaf and dumb.	Attending Certified Schools or Classes for the Deaf ...	3	1	4
		Attending Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
	(2) Suitable for training in a School or Class for the partially deaf.	Attending Certified Schools or Classes for the Deaf ...	—	—	—
		Attending Public Elementary Schools ...	—	1	1
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
MENTALLY DEFECTIVE.	Feeble-minded (cases not notifiable to the Local Control Authority).	Attending Certified Schools for Mentally Defective Children...	—	—	—
		Attending Public Elementary Schools ...	22	13	35
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	1	1
	Notified to the Local Control Authority.	Feeble-minded ...	—	—	—
		Imbeciles ...	—	—	—
		Idiots ...	—	—	—
			—	—	—



TABLE III., BOARD OF EDUCATION (continued).

			Boys.	GIRLS.	TOTAL.
EPILEPTICS.	Suffering from Severe Epilepsy.	Attending Certified Special Schools for Epileptics ...	—	—	—
		In Institutions other than Certified Special Schools ...	—	—	—
		Attending Public Elementary Schools ...	—	—	—
		At no School or Institution ...	—	—	—
	Suffering from Epilepsy which is not severe.	Attending Public Elementary Schools ...	2	3	5
		At no School or Institution ...	—	—	—
PHYSICALLY DEFECTIVE.	Infectious Pulmonary and Glandular Tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board...	—	—	—
		At other Institutions ...	1	—	1
		At no School or Institution ...	—	—	—
	Non-infectious but active Pulmonary and Glandular Tuberculosis	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board...	—	—	—
		At Certified Residential Open-Air Schools ...	—	—	—
		At Certified Day Open-Air Schools	—	—	—
		At Public Elementary Schools ...	10	1	11
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
	Delicate children (e.g., re- or latent Tuberculosis, Malnutrition, Debility, Anæmia, etc ).	At Certified Residential Open-Air Schools ...	—	—	—
		At Certified Day Open-Air Schools	—	—	—
		At Public Elementary Schools ...	21	37	58
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
	Active Non-Pulmonary Tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board ...	1	—	1
		At Public Elementary Schools ...	1	1	2
		At other Institutions ...	1	1	2
		At no School or Institution ...	—	—	—
	Crippled Children (other than those with active Tuberculosis disease) e.g., children suffering from Paralysis, &c., and including those with severe heart disease.	At Certified Hospital Schools ...	—	—	—
		At Certified Residential Cripple Schools ...	—	—	—
		At Certified Day Cripple Schools	—	—	—
		At Public Elementary Schools ...	19	14	33
		At other Institutions ...	—	1	1
		At no School or Institution ...	—	—	—

TABLE IV.

## BOARD OF EDUCATION.

Return of Defects treated during the Year ended December 31st.

GROUP 1. Minor Ailments (excluding Uncleanliness).

Disease or Defect.  1	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. 2	Otherwise. 3	TOTAL. 4
Skin—			
Ringworm, Scalp ... ..	8	3	11
Ringworm, Body ... ..	6	—	6
Scabies ... ..	4	—	4
Impetigo ... ..	189	—	189
Other Skin Diseases ...	21	—	21
Minor Eye Defects— (External and other, but ex- cluding cases falling in Group II.) ... ..	14	—	14
Minor Ear Defects— ... ..	34	—	34
Miscellaneous— (e.g., minor injuries, bruises, sores, chilblains, etc.) ...	497	59	556
Total ... ..	773	62	835

TABLE IV., BOARD OF EDUCATION (continued).

GROUP II. Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

Defect or Disease.	Number of Defects dealt with.			
	Under the Authority's Scheme.	Submitted to refraction by private practitioner or at Hospital, apart from the Authority's Scheme.	Otherwise.	TOTAL.
1	2	3	4	5
Errors of Refraction (including Squint). (Operations for Squint should be recorded separately in the body of the Report) ...	40	—	—	40
Other Defect or Disease of the Eyes (excluding those recorded in Group I.) ...	—	4	—	4
TOTAL ...	40	4	—	44

Total number of children for whom spectacles were prescribed :

- (a) Under the Authority's Scheme ... 40  
 (b) Otherwise ... .. —

Total number of children who obtained or received spectacles :

- (a) Under the Authority's Scheme ... 40  
 (b) Otherwise ... .. —

GROUP III. Treatment of Defects of Nose and Throat.

Number of Defects.				Total number treated.
Received Operative Treatment.			Received other forms of treatment.	
Under the Authority's Scheme, in Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	TOTAL.		
1	2	3	4	5
57	1	58	—	58



TABLE IV., BOARD OF EDUCATION (continued).

## GROUP IV.

(1) Number of children who were :—

(a) Inspected by the Dentist.

Aged	5	6	7	8	9	10	11	12	13	14	15	Total
	70	88	97	109	102	56	52	42	67	18	3	704
								Specials	...	...		673
								Grand Total...		...		1377

(b) Found to require treatment ... 1305

(c) Actually treated ... ... 704

(d) Treated during the year as the  
result of periodical examination 723(2) Half days devoted to { Inspection ... 8  
Treatment ... 139 Total... ... 147

(3) Attendances made by children for treatment ... ... 2543

(4) Fillings { Permanent Teeth ... 663  
Temporary Teeth ... 207 Total... ... 870(5) Extractions { Permanent Teeth ... 190  
Temporary Teeth ... 1548 Total... ... 1738

(6) Administrations of General Anæsthetics for Extractions ... Nil.

(7) Other Operations { Permanent Teeth 613  
Temporary Teeth 54 Total... ... 667

## Group V. Uncleanliness and Verminous Conditions.

(1) Average number of visits per School made during the year  
by the School Nurses ... ... 118(2) Total number of examinations of children in the Schools by  
School Nurses ... ... 9224

(3) Number of individual children found unclean ... 252

(4) Number of children cleansed under arrangements made by  
the Local Education Authority ... ... Nil.

(5) Number of cases in which Legal proceedings were taken :

(a) Under the Education Act, 1921 ... ... Nil.

(b) Under School Attendance Bye-Laws ... ... Nil.

